

APPLICATION FOR CITIZENS FIRE ACADEMY 2006



CLASS # 2

NAME_____

ADDRESS_____

PHONE_____

E-MAIL_____

FAX#_____

REASON FOR WANTING TO TAKE CLASS:

MAIL COMPLETED APPLICATION TO:
SHREWSBURY FIRE DEPT, 11 CHURCH RD. SHREWSBURY, MA. 01545 OR
DROP IT OFF AT FIRE HEAD QUARTERS. THE APPLICATION WILL BE ON LINE TOO.

MY E-Mail ADDRESS IS SFDAPT3@YAHOO.COM

THANK YOU AND GOOD LUCK, Capt William Cummins, Director